



JC960 U.S. PTO

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PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. ZI154/02118

First Inventor ROBINSON

CLOSURE FOR A RETORT PROCESSED CONTAINER HAVING A PEELABLE SEAL

Express Mail Label No. EL 800661116US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. <input checked="" type="checkbox"/>	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)
2. <input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.
3. <input checked="" type="checkbox"/>	Specification [Total Pages 22] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure
4. <input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
5. Oath or Declaration	[Total Pages 1]
a. <input checked="" type="checkbox"/>	Newly executed (original or copy)
b. <input type="checkbox"/>	Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 complete)</i>
i. <input type="checkbox"/>	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. <input checked="" type="checkbox"/>	Application Data Sheet. See 37 CFR 1.76

7. CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)

8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. CD-ROM or CD-R (2 copies); or

ii. paper

c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)

11. English Translation Document *(if applicable)*

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Statement (IDS)/PTO-1449 Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.

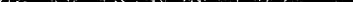
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: _____ *Examiner* _____ *Group Art Unit:* _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a particular reference is specifically mentioned in the submitted application parts.

Customer Number or Bar Code Label  or Correspondence address below

Name				
Address				
City	State		Zip Code	
Country	Telephone		Fax	

Name (Print/Type)	Joan L. Simunic	Registration No. (Attorney/Agent)	43,125
Signature			Date

12/21/01
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 954.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	ROBINSON
Examiner Name	
Group Art Unit	
Attorney Docket No.	ZI154/02118

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. **Payment Enclosed:**

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee Description	Fee Paid
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
SUBTOTAL (1)				(\$ 740.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
25	-20** = 5	x 18.00	= 90.00
9	-3** = 1	x 84.00	= 84.00
Multiple Dependent			

Large Entity Small Entity

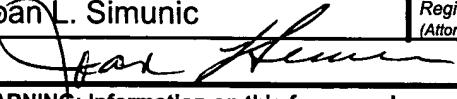
Fee Code	Fee (\$)	Fee Code	Fee Description
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9
SUBTOTAL (2)			
(\$ 174.00)			

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$ 40.00)			

SUBMITTED BY

Name (Print/Type)	Joan L. Simunic	Registration No. (Attorney/Agent)	43,125	Telephone	502 584 1135
Signature				Date	12/21/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**NONPUBLICATION REQUEST
UNDER
35 U.S.C. 122(b)(2)(B)(i)**

First Named Inventor	ROBINSON
Title	CLOSURE FOR A RETORT PROCESSED CONTAINER HAVING A PEELABLE SEAL
Atty Docket Number	ZI154/02118

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

I hereby request that the attached application not be published under 35 U.S.C. 122(b).

12/21/2001

Date



Signature

JOAN L. SIMUNIC, REG. NO. 43,125

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**